2CE164 EB

Attorney's Docket No. <u>002010-746</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In PE In Patent A	polication of	
(3)		Group Art Unit: 1644
7006. A RUBIN)
	10.: 09/010,377 TELEMANERO	Examiner: Phillip Gambel, Ph.D.
	ry 21, 1998	Confirmation No.: 8602 RECEIVED
ENCI BLO	ATMENT OF VIRAL EPHALITIS BY AGENTS CKING ALPHA-VLA-4 INTEGRIN CTION	SEP 1 6 2003
1.014	CHON	TECH CENTER 1600/2900
	REQUEST FOR CONTIN TRANSMITT	UED EXAMINATION
MAIL STOP Commissione P.O. Box 145 Alexandria, V	er for Patents	Customer No. 2 1 8 3 9
Sir:		
Appl [] \$375.00	icant(s) requests continued examination (2801) [X] \$750.00 (1801) fee due un	n under 37 C.F.R. § 1.114 and enclose the order 37 C.F.R. § 1.17(e).
1. [] A.	Applicant(s) requests that any previous entered. Continued examination is reidentified in item 2 below.	asly unentered after final amendments <u>not</u> be equested based on the enclosed documents
[] B.	examination is requested:	e following documents for which continued oly under 37 C.F.R. § 1.116 previously filed on _
	[] Consider the arguments in the	Appeal Brief or Reply Brief previously filed on _
	Other:	
2. The [X] [] [X] [X] [X]	following documents are enclosed with Reply Under 37 C.F.R. § 1.111 and C.F.R. § 1.114 Affidavit(s)/Declaration(s). Information Disclosure Statement (II Petition for Extension of Time. Other: PTO-1449 with 18 document	Request for Continued Examination Under 37
3. [] [X] []	Small entity status is hereby claimed No additional claim fee is required. The fee is calculated below on the b for in this application prior to this su	asis of the highest number of claims already paid

09/12/2003 CNGUYEN 00000063 09010377

(05/03)

Request for Continued Examination Transmittal Letter Application No. 09/010,377 Attorney's Dockerson 022010,746

SEP 1 6 2003

		CLAI	MS	TECH CENTER 1600/29	
	No. OF CLAIMS	HIGHEST NO. OF CLAIMS THUS PAID FOR	EXTRA CLAIMS	RATE	FEE_
Basic Fee					\$750.00 (1001)
Total Claims	21	MINUS 22 =	-0-	× \$18.00 (1202) =	-0-
Independent Claims	5	MINUS 5 =	-0-	× \$84.00 (1201) =	-0-
If multiple dependent	claims are p	resented, add \$280.0	0 (1203)		
Total Fee					
If small entity status i	s claimed, su	btract 50% of Total	Fee		
TOTAL FEE DUE					-0-

4.	[X]	A check in the amount of \$ 1.680.00 is enclosed for the RCE and Petition for Extension of Time fee due.

- 5. [] Charge \$ ______ to Deposit Account No. 02-4800 for the fee due.
- 6. [] Applicant(s) requests suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: September 11, 2003

Low E. William

Registration No. 48,036

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620